

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2000

Application or Docket Number

NO 078-100002  
09/943786**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

<b>TOTAL CLAIMS</b>	<i>20</i>	
FOR	NUMBER FILED	NUMBER EXTRA
<b>TOTAL CHARGEABLE CLAIMS</b>	<i>20</i> minus 20 =	
<b>INDEPENDENT CLAIMS</b>	<i>15</i> minus 3 =	<i>2</i>
<b>MULTIPLE DEPENDENT CLAIM PRESENT</b>		<input type="checkbox"/>

SMALL ENTITY  
TYPE OTHER THAN  
SMALL ENTITY  
OR

RATE	FEES
BASIC FEE	355.00
X\$ 9=	
X40=	
+135=	
<b>TOTAL</b>	

RATE	FEES
BASIC FEE	710.00
X\$18=	
X80=	<i>168</i>
+270=	
<b>TOTAL</b>	<i>710</i>

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
					(Column 1)	(Column 2)
Total	<i>20</i>	Minus	<i>20</i>	= <input checked="" type="checkbox"/>		
Independent	<i>5</i>	Minus	<i>5</i>	= <input checked="" type="checkbox"/>		
<b>FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM</b> <input type="checkbox"/>						

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
<b>TOTAL</b>		<b>TOTAL</b>	

ADDITIONAL FEE OR ADDITIONAL FEE

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
					(Column 1)	(Column 2)
Total	<i>20</i>	Minus	<i>20</i>	= <input checked="" type="checkbox"/>		
Independent	<i>5</i>	Minus	<i>5</i>	= <input checked="" type="checkbox"/>		
<b>FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM</b> <input type="checkbox"/>						

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
<b>TOTAL</b>		<b>TOTAL</b>	

ADDITIONAL FEE OR ADDITIONAL FEE

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
					(Column 1)	(Column 2)
Total	<i>21</i>	Minus	<i>21</i>	= <input type="checkbox"/>		
Independent	<i>5</i>	Minus	<i>5</i>	= <input type="checkbox"/>		
<b>FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM</b> <input type="checkbox"/>						

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
<b>TOTAL</b>		<b>TOTAL</b>	

ADDITIONAL FEE OR ADDITIONAL FEE

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.